## Arkansas Board of Registration For Professional Engineers & Land Surveyors

PO Box 3750

Little Rock, AR 72203-3750
Telephone: 501-682-2824 Fax: 501-682-2827

www.arkansas.gov/pels

2008 Renewal Notice for Professional Engineer

number only if it has changed since January 1, 2007.

PDH Previous Carryover:		YOUR LICENSE EXPIRES ON DECEMBER 31, 2007
Name: PE #: Address:		Professional Engineer Renewal Fee: \$40.00 – if postmarked prior to Dec. 31, 2007
		You must complete this form and return with payment postmarked to PE & PLS Fund no later than December
Current Firm:  If this Firm offers engineering and/or surveying se Firm must have a Certificate of Authorization (CO Preferred Mailing Address Same as above (with zip +4)  Change:  Daytime phone:  E-mail address:	A).	31, 2007. Please write your license number on your check or money order.  Professional Engineer REINSTATEMENT Fees: \$60.00 – January 1, 2008 to February 28, 2008 \$80.00 – March 1, 2008 to June 30, 2008  Please visit the online roster on our website to review the status of your renewal. As renewals are processed the renewal year will change to "2008". You may also verify your company information and mailing address.
Certification/Affirmation of Eligibility for Lice information contained herein is true and correct. I have 101 et seq. and Rules of the Board and I agree to able audited, I will be required to submit supporting docur made on this document, is a cause for disciplinary active.	ensure Renewal – I he re met all the requirements de by the Rules of Professimentation. I understand the ion.	reby enclose my payment for the renewal fee and certify that: The for licensure renewal set forth by the State of Arkansas A.C.A. 17-30 onal Conduct. I understand that I may be audited by the Board and i at failure to comply with such requirements, or any false statements in Arkansas? No: Yes: (include information y be conducted).
		ent Hours (PDH) between January 1, 2007 and December 31, at the top of this page). <i>Do <u>not</u> send PDH documentation.</i>
<ul> <li>New Registrant/Licensee since Octobe</li> <li>Requesting or continuing in an Inactive</li> <li>Out of the Country or on temporary at Requesting or continuing in an Exempt 1983).</li> <li>I am licensed in a state where I have</li> </ul>	per 27, 2006.  Ve Status.  Citive military duty for 120  Cot Status (I was born beform  Met their <u>mandatory</u> Profe	upon (please check one & INCLUDE APPROPRIATE FEES): consecutive days between January 1 and December 31, 2007. re January 1, 1943 <u>AND</u> registered as a PE before January 1, essional Competency requirement of at least 15 PDH per year O MS MT ND NE NV NH NM NC OH OK OR SC SD TX WV
☐ I do not wish to renew my Arkansas license. I active files.	am returning this form wit	hout renewal fee and request removal of my name from your
Printed Name		*SSN#
Signature	PE #	Date
*According to Arkansas Law. and for the purpose o	f administering the State	Child Support Program, provide your current social security

**Board Use Only** 

\$60.00

\$80.00

Date Rec'd:

\$40.00

CA/MO/CC/TC/CS CK/PC #\_